

## **Site Accreditation Report – Prairie View Prevention Services**

**Completed: July 28, 2020**

**Levels of Care Reviewed:**

**Substance Use Disorder (SUD) Services**

**Prevention**

**Outpatient Services**

**Review Process:** Prairie View Prevention Services was reviewed by Division of Behavioral Health staff for adherence to the Administrative Rules of South Dakota (ARSD) and Contract Attachments. The following information was derived from the on-site accreditation survey of your agency. This report includes strengths, recommendations, results from reviewing policies and procedures, personnel and case file records, and conducting interviews with administration and agency staff.

**Administrative Review Score: 95.9%**

**Combined Client Chart Review Score: 99%**

**Cumulative Score: 98.1%**

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### **ADMINISTRATIVE REVIEW SUMMARY**

#### **Strengths:**

The agency verbalizes a passion for working with their clients. The agency's policy and procedure manual is detailed and organized. The staff interviewed reported positive feedback about the agency regarding clinical supervision and feeling supported by administration. The agency has developed several partnerships within the community and identifies the importance of having working relationships with other agencies.

**Recommendations: None**

#### **Plan of Correction:**

1. According to ARSD 67:61:05:05, SUD and Prevention programs shall maintain written personnel policies and records for all staff including each employee, including contracted staff, intern, and volunteer and must include:
  - (1) application filed for employment or resume and transcripts or diploma and continuing education;
  - (2) a position description signed by the staff with a statement of duties and responsibilities and the minimum qualifications and competencies necessary to fulfill these duties;
  - (3) the completion of appropriate pre-hire screening will be evident for staff that provide direct services to vulnerable populations;
  - (4) documentation of the staff's orientation in accordance with § 67:61:05:05;



- (5) copies of the staff's current credentials related to job duties; and any staff health clearances, including the tuberculin test results, if required, and clearances from a licensed physician after an infectious or contagious disease requires the staff's absence from the program.

In review of the personnel files the completion of appropriate pre-hire screening was not found. The agency should ensure a copy of the screening is found in the personnel files.

## **CLIENT CHART REVIEW SUMMARY**

### **Strengths:**

The integrated assessments are thorough and organized. Client's progress is documented well through treatment plans, progress notes, and discharge summaries. Clients appear involved in their treatment process as evidenced by individualized client notes and client statements in the charts.

### **Recommendations:**

1. According to ARSD 67:61:07:06, an addiction counselor or counselor trainee shall develop an individualized treatment plan based upon the integrated assessment for each client admitted to an outpatient treatment program. The treatment plan shall be completed within thirty calendar days of admission. In review of the charts, one out of four charts reviewed had a treatment plan that was four days late. The agency should ensure their treatment plans are completed on time.
2. According to 67:61:07:07, The program shall document for each client the progress and reasons for retaining the client at the present level of care; and an individualized plan of action to address the reasons for retaining the individual in the present level of care. This document is maintained in the client case record. The individualized plan of action to address the reasons for retaining the individual in the present level of care shall be documented every thirty days for outpatient treatment services. In review of the charts, one out of four charts reviewed had a continued service review that was twenty-four days late.

**Plan of Correction: None**